Docket No.: 122001

DECLARATION UNDER 35 USC §371(c)(4) FOR -PCT APPLICATION FOR UNITED STATES PATENT

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below under my name;

I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought, namely the invention entitled: Hydraulic Device for the Thermo-Pneumatic Insulation and Optional Agitation of the Contents of an Operative Cavity

described and claimed in international application number PCT/FR 03/01946 filed June 24, 2003.

I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations §1.56.

Under Title 35, U.S. Code §119, the priority benefits of the following foreign application(s) filed by me or my legal representatives or assigns within one year prior to my international application are hereby claimed:

French Patent Application No. 02.08038 filed June 24, 2002

The following application(s) for patent or inventor's certificate on this invention were filed in countries foreign to the United States of America either (a) more than one year prior to my international application, or (b) before the filing date of the above-named foreign priority application(s):

ALL CORRESPONDENCE IN CONNECTION WITH THIS APPLICATION SHOULD BE SENT TO OLIFF & BERRIDGE, PLC, CUSTOMER NUMBER 25944, TELEPHONE (703) 836-6400.

I hereby declare that I have reviewed and understand the contents of this Declaration, and that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

1	Typewritten Full Name of Sole or First Inventor:	Yves		FOUILLET	
2	•	Given Name Fouillet	Middle Initial	Family Name	
3	Date of Signature:	12_	21	2004	
•	•	Month	Day	Year	
	Residence:	Voreppe_ +K	X	France	
		City	State or Province	Country	
	Citizenship: French				
	Post Office Addres		17 chemin des Carrières 38340 VOREPPE France		
	(Insert complete m address, including	ailing country)	٠.		

Note to Inventor: Please sign name on line 2 exactly as it appears in line 1 and insert the actual date of signing on line 3.

(Discard this page in a sole inventor application)

	Typewritten Full Name	Patrick		POLITEAU.
	of Joint Inventor:	Given Name	Middle Initial	Family Name
2	Inventor's Signature:	Patrick		POUTEAU
3	Date of Signature:	1)	21	2004 X
3	Date of Signature.	Month O	Day	Year
	Residence:	Meylan FKX		France
		City	State or Province	Country
	Citizenship: French			· · · · · · · · · · · · · · · · · · ·
	Post Office Address: (Insert complete maili address, including cou	ng	leau 38240 MEYLAN France	
1	Typewritten Full Name	•		_
·	of Joint Inventor:	Nicolas		SARRUT
2	Inventor's Signature:	Given Name	Middle Initial	Family Name
	- · · -	12	21	2004
3	Date of Signature:	Month	Day	Year
	Residence:	· · · · · · · · · · · · · · · · · · ·	$\mathcal{D}X$	France
		SSINET-PARISET City	State or Province	Country
	Citizenship: French	City		
	•	140 nie Georges Maed	ier 38170 SEYSSINET-PARISE	T France
	Post Office Address: (Insert complete maili address, including cou	ng		
1	Typewritten Full Name			CRIOT
	of Joint Inventor:	Frederic	Middle Initial	GINOT Family Name
_		Given Name	Gim of	rainiy Name . A
2	Inventor's Signature:	Frederic		
3	Date of Signature:	12	2.4 Day	Year Year
	Desidence	Month	/ Day	
	Residence:	Saint Egreve HO	State or Province	France Country
	Citi allian Franch	City	State or Province	Country
	Citizenship: French			1.00
	Post Office Address: (Insert complete maili address, including co	ng	r 38120 SAINT EGREVE France	B
1	Typewritten Full Name			
_	of Joint Inventor:	_Dominique		MASSE
_		Given Name	Middle Initial	Family Name
2	Inventor's Signature:	Dominique	23	2004
	Date of Signature:	Month	Day	Year
3	,	Monai	Day	
3	Paridonae.	COV		
3	Residence:	Coublevie FRX	State or Drovinge	France
3	• • •	Coublevie FRX City	State or Province	Country
3	Citizenship: French	City		Country
3	• • •	City 202 Lotissement La G	State or Province	Country

Note to inventor: Please sign name on line 2 exactly as it appears in line 1 and insert the actual date of signing on line 3.

This form may be executed only when attached to the first page of the Declaration and Power of Attorney of the application to which it pertains.